FORM D / SEC



UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEP 2 8 2003

Expires: April 30, 2008
Estimated average burden

OMB APPROVAL

3235-0076

Serial

hours per response16.00

SEC USE ONLY

Prefix

OMB Number:

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series D Preferred Stock Financing ☐ Rule 505 ion 4(6) Rule 504 Filing Under (Check box(es) that apply): Type of Filing: New Filing BASIC IDENTIFICÁTIÓN DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate changed IPLocks, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 2665 N. First Street, Suite 110, San Jose, CA 95134-2033 (408) 383-7500 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different Telephone Number (Including Area Code) from Executive Offices) Brief Description of Business Provider of information risk management and database security solutions. Type of Business Organization Corporation limited partnership, already formed business trust limited partnership, to be formed other (please specify): Month Year 0 1 0 2 Actual A Estimated Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: Jurisdiction of Incorporation or Organization: CN for Canada; FN for other foreign jurisdiction) D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97) Photo 1046

BASIC IDENTIFICATION DATA A. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or ⊠ Beneficial Owner Executive Officer Director \boxtimes Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Sakamoto, Akio Business or Residence Address (Number and Street, City, State, Zip Code) C/o IPLocks, Inc., 2665 N. First Street, Suite 110, San Jose, CA 95134-2033 Director Check Box(es) that Apply: ✓ Promoter ■ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Motegi, Koichi Business or Residence Address (Number and Street, City, State, Zip Code) C/o IPLocks, Inc., 2665 N. First Street, Suite 110, San Jose, CA 95134-2033 Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Mukherjee, Biswanath Business or Residence Address (Number and Street, City, State, Zip Code) 2600 Calder Court, Davis, CA 95616 ☐ Beneficial Owner **Executive Officer** □ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Nakagawa, Yoichiro Business or Residence Address (Number and Street, City, State, Zip Code) C/o Nakagawa Special Steel Co., Inc., 3-5-4 Tsukiji, Chuo-ku, Tokyo 104-0045 Japan Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Ungermann, Ralph Business or Residence Address (Number and Street, City, State, Zip Code) 1245 Vallejo Street, San Franicsco, CA 94133 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Winkler, Agnieszka Business or Residence Address (Number and Street, City, State, Zip Code) C/o POB 7049, Incline Villiage, NV 89450 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Yoshida, Nobuya Business or Residence Address (Number and Street, City, State, Zip Code) C/o CyberLink, Inc., Kyodo Building, Kodenma-cho 13-4, Nihonbashi, Chuo-ku, Tokyo 103-0001 Japan (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer ☐	Director General and/or Managing Partner
Full Name (Last name first, it Sano, Chikara	f individual)			
Business or Residence Addre	es (Number and St	aet City State Zin Code)		
7-21-4 Fukasawa, Setagaya		-		
				Director Commended
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, i	f individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer ☐	Director General and/or Managing Partner
Full Name (Last name first, i	f individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, i	f individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, i	f individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		······································
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, i	f individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer ☐	Director General and/or Managing Partner
Full Name (Last name first,	if individual)			
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		
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Full Name (Last name first,	if individual)	······································		
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)		

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				B.	INFOR	MATION A	BOUT OF	FERING				
	1 1 1		augrines de	a call to = c	n nooroditad :	nvactore in a	nic offerings				Yes	No ⊠
1. Has the	issuer sold,	or does the is	suer intend to		i-accredited i ilso in Appen					***************************************		Ŋ
2. What is	the minimur	n investment	that will be				_				\$	N/A
											Yes	No
	ne offering pe										\boxtimes	L
remune	ne information eration for solution or agent of a l	icitation of pu	irchasers in c	onnection w	ith sales of se	ecurities in th	e offering. If	f a person to b	e listed is an	associated		
than fiv	e (5) persons	to be listed a	re associated	persons of	such a broker	or dealer, yo	ou may set fo	rth the inforn	nation for tha	at broker or		
dealer of Full Name (I		st. if individu	al)				=					
N/A												
Business or I	Residence Ad	ldress (Numb	er and Street	, City, State	, Zip Code)							
Name of Ass	sociated Brok	er or Dealer								<u> </u>		
States in Wh	ich Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers	·						
	All States" or							********	***************************************	**************	□ A1	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
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Full Name (I Business or I				t, City, State	, Zip Code)							
Name of Ass	sociated Brok	er or Dealer			\							
States in Wh	ich Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers							
(Check "A	All States" or	check indivi	duals States).				••••••••	·····			□ A:	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]
Full Name (Last name fir	st, if individu	ial)	<u></u>	<u></u>		· -				_	
Business or	Residence Ac	ddress (Numb	per and Stree	t, City, State	e, Zip Code)			<u></u> .	·- <u>-</u>			
Name of Ass	sociated Brok	ker or Dealer										<u></u>
States in Wh	ich Person L	isted Has Sol	licited or Inte	ends to Solic	it Purchasers		·		<u> </u>			
(Check "/	All States" or	check indivi	duals States)					***************************************			□А	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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			(Use l	olank sheet,	or copy and t	use additiona	I copies of th	nis sheet, as n	ecessary)	<u> </u>		

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
•	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	Amount Almodu
	Type of Security Debt	Aggregate Offering Price \$	Amount Already Sold \$
	Equity		\$ 2,200,000.00
	Common Preferred	<u> </u>	<u></u>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$
	Other (Specify)		\$
	Total		\$ 2,200,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ_11,000,000.00	Ψ <u>Z,200,000.00</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	2	\$2,200,000.00_
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3,	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Torres	D. II A
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$N/A
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$N/A
	Total	N/A	\$N/A
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ 25,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$25,000.00

5. Indicathe pursue of forth in Salarie Purch. Const. Acquir used i Repay. Work. Other. Column	expenses furnished in response to geds to the issuer."	gregate offering price given in response of Part C - Question 4.a. This difference is ted gross proceeds to the issuer used or proceeds any purpose is not known, furnish an estimate and the adjusted growth above. Attion of machinery and equipment	the "adjusted gross posed to be used for each of nate and check the box to the less proceeds to the issuer set [Payments to Officers, Directors Affiliates \$	Others \$\$ \$\$ \$\$ \$\$ \$\$
the purleft of forth in Salarion Purch. Const. Acquired in Repay Work. Other	urposes shown. If the amount for f the estimate. The total of the print response to Part C - Question ries and fees	any purpose is not known, furnish an esting the adjusted grown of machinery and equipment	is offering that may be	Payments to Officers, Directors Affiliates \$	Others \$\$ \$\$ \$\$ \$\$ \$\$
Purch Purch Const Acqui used i Repay Work Other	hase of real estatehase, rental or leasing and install struction or leasing of plant build uisition of other businesses (incluin exchange for the assets or sec ayment of indebtednessking capital	ation of machinery and equipment ings and facilities ding the value of securities involved in the surities of another issuer pursuant to a meaning to the surities of a meaning to	is offering that may be	Officers, Directors Affiliates \$ \$ \$ \$ \$ \$	Others \$\$ \$\$ \$\$ \$\$ \$\$
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Purcha Const Acqui used i Repay Work Other	hase, rental or leasing and install struction or leasing of plant build uisition of other businesses (incluin exchange for the assets or seconyment of indebtedness	ation of machinery and equipment ings and facilities	is offering that may be] \$] \$] \$	\$ \$
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used i Repay Work Other	in exchange for the assets or sec ayment of indebtednessking capital	urities of another issuer pursuant to a me	ger) [🗆 \$
Work Other Colum	king capital		[٦,	
Other Colum				_	\$
Colum			[] \$	⋈ \$10,975,000.00
	er (specify):		[\$
5	ımn Totals			■ \$0	\$10,975,000.00
	Total Payments Listed (column	totals added)		⊠ \$ <u>10</u>	0,975,000.00
	Street to only	D. FEDERAL	SIGNATURE		
undertaking accredited in		gned by the undersigned duly authorized per Securities and Exchange Commission, upon 2) of Rule 502.		e information furnish	
IPLocks, In				ember 21, 2005	
Name of Si Akio Sakar	Signer (Print or Type)	Title of Signer (Print or Typ President and CEO	e)		

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)